

United States Bankruptcy Court for the:

DISTRICT OF OREGON

Case number *(if known)* Chapter **7**

page 1

7. Describe debtor's business

A. Check one:

☐ Health Care Business (as defined in 11 U.S.C. § 101(27A))

☐ Single Asset Real Estate (as defined in 11 U.S.C. § 101(51B))

☐ Railroad (as defined in 11 U.S.C. § 101(44))

☐ Stockbroker (as defined in 11 U.S.C. § 101(53A))

☐ Commodity Broker (as defined in 11 U.S.C. § 101(6))

☐ Clearing Bank (as defined in 11 U.S.C. § 781(3))

☒ None of the above

B. Check all that apply

☐ Tax-exempt entity (as described in 26 U.S.C. §501)

☐ Investment company, including hedge fund or pooled investment vehicle (as defined in 15 U.S.C. §80a-3)

☐ Investment advisor (as defined in 15 U.S.C. §80b-2(a)(11))

C. NAICS (North American Industry Classification System) 4-digit code that best describes debtor. See <http://www.uscourts.gov/four-digit-national-association-naics-codes>.

3119

8. Under which chapter of the Bankruptcy Code is the debtor filing?

A debtor who is a "small business debtor" must check the first sub-box. A debtor as defined in § 1182(1) who elects to proceed under subchapter V of chapter 11 (whether or not the debtor is a "small business debtor") must check the second sub-box.

Check one:

☒ Chapter 7

☐ Chapter 9

☐ Chapter 11. Check all that apply:

☐ The debtor is a small business debtor as defined in 11 U.S.C. § 101(51D), and its aggregate noncontingent liquidated debts (excluding debts owed to insiders or affiliates) are less than \$3,024,725. If this sub-box is selected, attach the most recent balance sheet, statement of operations, cash-flow statement, and federal income tax return or if any of these documents do not exist, follow the procedure in 11 U.S.C. § 1116(1)(B).

☐ The debtor is a debtor as defined in 11 U.S.C. § 1182(1), its aggregate noncontingent liquidated debts (excluding debts owed to insiders or affiliates) are less than \$7,500,000, and it chooses to proceed under Subchapter V of Chapter 11. If this sub-box is selected, attach the most recent balance sheet, statement of operations, cash-flow statement, and federal income tax return, or if any of these documents do not exist, follow the procedure in 11 U.S.C. § 1116(1)(B).

☐ A plan is being filed with this petition.

☐ Acceptances of the plan were solicited prepetition from one or more classes of creditors, in accordance with 11 U.S.C. § 1126(b).

☐ The debtor is required to file periodic reports (for example, 10K and 10Q) with the Securities and Exchange Commission according to § 13 or 15(d) of the Securities Exchange Act of 1934. File the Attachment to Voluntary Petition for Non-Individuals Filing for Bankruptcy under Chapter 11 (Official Form 201A) with this form.

☐ The debtor is a shell company as defined in the Securities Exchange Act of 1934 Rule 12b-2.

☐ Chapter 12

9. Were prior bankruptcy cases filed by or against the debtor within the last 8 years?

If more than 2 cases, attach a separate list.

☒ No.

☐ Yes.

District

When

Case number

District

When

Case number

10. Are any bankruptcy cases pending or being filed by a business partner or an affiliate of the debtor? ☐ No ☒ Yes.

List all cases. If more than 1, attach a separate list

Debtor	<b>William Mark Tosheff, II</b>	Relationship	<b>Director</b>
District	<b>Oregon</b>	When	<b>9/11/23</b>
		Case number, if known	<b>23-32043-pcm13</b>

11. Why is the case filed in this district? Check all that apply:
- ☒ Debtor has had its domicile, principal place of business, or principal assets in this district for 180 days immediately preceding the date of this petition or for a longer part of such 180 days than in any other district.
- ☐ A bankruptcy case concerning debtor's affiliate, general partner, or partnership is pending in this district.

12. Does the debtor own or have possession of any real property or personal property that needs immediate attention? ☒ No ☐ Yes.
- Answer below for each property that needs immediate attention. Attach additional sheets if needed.
- Why does the property need immediate attention?** (Check all that apply.)
- ☐ It poses or is alleged to pose a threat of imminent and identifiable hazard to public health or safety.  
What is the hazard? \_\_\_\_\_
- ☐ It needs to be physically secured or protected from the weather.
- ☐ It includes perishable goods or assets that could quickly deteriorate or lose value without attention (for example, livestock, seasonal goods, meat, dairy, produce, or securities-related assets or other options).
- ☐ Other \_\_\_\_\_
- Where is the property?** \_\_\_\_\_  
Number, Street, City, State & ZIP Code
- Is the property insured?**
- ☐ No
- ☐ Yes. Insurance agency \_\_\_\_\_  
Contact name \_\_\_\_\_  
Phone \_\_\_\_\_

### Statistical and administrative information

13. Debtor's estimation of available funds Check one:
- ☒ Funds will be available for distribution to unsecured creditors.
- ☐ After any administrative expenses are paid, no funds will be available to unsecured creditors.

14. Estimated number of creditors
- |   |  |  |
|---|--|--|
| <input type="checkbox"/> 1-49             | <input type="checkbox"/> 1,000-5,000   | <input type="checkbox"/> 25,001-50,000     |
| <input checked="" type="checkbox"/> 50-99 | <input type="checkbox"/> 5001-10,000   | <input type="checkbox"/> 50,001-100,000    |
| <input type="checkbox"/> 100-199          | <input type="checkbox"/> 10,001-25,000 | <input type="checkbox"/> More than 100,000 |
| <input type="checkbox"/> 200-999          |  |  |

15. Estimated Assets
- |  |  |  |
|--|--|--|
| <input type="checkbox"/> \$0 - \$50,000          | <input checked="" type="checkbox"/> \$1,000,001 - \$10 million | <input type="checkbox"/> \$500,000,001 - \$1 billion     |
| <input type="checkbox"/> \$50,001 - \$100,000    | <input type="checkbox"/> \$10,000,001 - \$50 million           | <input type="checkbox"/> \$1,000,000,001 - \$10 billion  |
| <input type="checkbox"/> \$100,001 - \$500,000   | <input type="checkbox"/> \$50,000,001 - \$100 million          | <input type="checkbox"/> \$10,000,000,001 - \$50 billion |
| <input type="checkbox"/> \$500,001 - \$1 million | <input type="checkbox"/> \$100,000,001 - \$500 million         | <input type="checkbox"/> More than \$50 billion          |

16. Estimated liabilities

☐ \$0 - \$50,000  
☐ \$50,001 - \$100,000  
☐ \$100,001 - \$500,000  
☐ \$500,001 - \$1 million

☐ \$1,000,001 - \$10 million  
☒ \$10,000,001 - \$50 million  
☐ \$50,000,001 - \$100 million  
☐ \$100,000,001 - \$500 million

☐ \$500,000,001 - \$1 billion  
☐ \$1,000,000,001 - \$10 billion  
☐ \$10,000,000,001 - \$50 billion  
☐ More than \$50 billion

**Request for Relief, Declaration, and Signatures**

**WARNING** -- Bankruptcy fraud is a serious crime. Making a false statement in connection with a bankruptcy case can result in fines up to \$500,000 or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

**17. Declaration and signature  
of authorized  
representative of debtor**

The debtor requests relief in accordance with the chapter of title 11, United States Code, specified in this petition.

I have been authorized to file this petition on behalf of the debtor.

I have examined the information in this petition and have a reasonable belief that the information is true and correct.

I declare under penalty of perjury that the foregoing is true and correct.

Executed on **June 20, 2024**  
MM / DD / YYYY

**X /s/ Jacob Crabtree**  
Signature of authorized representative of debtor  
  
Title **CEO**

**Jacob Crabtree**  
Printed name

**18. Signature of attorney**

**X /s/ Theodore J. Piteo**  
Signature of attorney for debtor

Date **June 20, 2024**  
MM / DD / YYYY

**Theodore J. Piteo**  
Printed name

**Michael D. O'Brien & Associates, P.C.**  
Firm name

**12909 SW 68th Parkway, Suite 160**  
**Portland, OR 97223**  
Number, Street, City, State & ZIP Code

Contact phone **503-786-3800** Email address **enc@pdxlegal.com**

**090311 OR**  
Bar number and State

**United States Bankruptcy Court**  
**District of Oregon**

In re **CHTC Inc.**

Debtor(s)

Case No.

Chapter

**7**

**DISCLOSURE OF COMPENSATION OF ATTORNEY FOR DEBTOR(S)**

1. Pursuant to 11 U.S.C. § 329(a) and Fed. Bankr. P. 2016(b), I certify that I am the attorney for the above named debtor(s) and that compensation paid to me within one year before the filing of the petition in bankruptcy, or agreed to be paid to me, for services rendered or to be rendered on behalf of the debtor(s) in contemplation of or in connection with the bankruptcy case is as follows:

For legal services, I have agreed to accept .....	\$	<u><b>14,009.00</b></u>
Prior to the filing of this statement I have received .....	\$	<u><b>14,009.00</b></u>
Balance Due .....	\$	<u><b>0.00</b></u>

2. The source of the compensation paid to me was:

☒ Debtor      ☐ Other (specify):

3. The source of compensation to be paid to me is:

☒ Debtor      ☐ Other (specify):

4. ☒ I have not agreed to share the above-disclosed compensation with any other person unless they are members and associates of my law firm.

☐ I have agreed to share the above-disclosed compensation with a person or persons who are not members or associates of my law firm. A copy of the agreement, together with a list of the names of the people sharing in the compensation is attached.

5. In return for the above-disclosed fee, I have agreed to render legal service for all aspects of the bankruptcy case, including:

- a. Analysis of the debtor's financial situation, and rendering advice to the debtor in determining whether to file a petition in bankruptcy;
- b. Preparation and filing of any petition, schedules, statement of affairs and plan which may be required;
- c. Representation of the debtor at the meeting of creditors and confirmation hearing, and any adjourned hearings thereof;
- d. [Other provisions as needed]

**Negotiations with secured creditors to reduce to market value; exemption planning; preparation and filing of reaffirmation agreements and applications as needed.**

6. By agreement with the debtor(s), the above-disclosed fee does not include the following service:

**Preparation and filing of motions pursuant to 11 USC 522(f)(2)(A) for avoidance of liens on household goods.  
Representation of the debtors in any dischargeability actions, judicial lien avoidances, relief from stay actions or any other adversary proceeding.**

**CERTIFICATION**

I certify that the foregoing is a complete statement of any agreement or arrangement for payment to me for representation of the debtor(s) in this bankruptcy proceeding.

**June 20, 2024**

*Date*

**/s/ Theodore J. Piteo**

**Theodore J. Piteo**

*Signature of Attorney*

**Michael D. O'Brien & Associates, P.C.**

**12909 SW 68th Parkway, Suite 160**

**Portland, OR 97223**

**503-786-3800 Fax: 503-272-7796**

**enc@pdxlegal.com**

*Name of law firm*

**Fill in this information to identify the case:**

Debtor name CHTC Inc.

United States Bankruptcy Court for the: DISTRICT OF OREGON

Case number (if known) \_\_\_\_\_

☐ Check if this is an amended filing

**Official Form 202**

**Declaration Under Penalty of Perjury for Non-Individual Debtors**

12/15

An individual who is authorized to act on behalf of a non-individual debtor, such as a corporation or partnership, must sign and submit this form for the schedules of assets and liabilities, any other document that requires a declaration that is not included in the document, and any amendments of those documents. This form must state the individual's position or relationship to the debtor, the identity of the document, and the date. Bankruptcy Rules 1008 and 9011.

**WARNING -- Bankruptcy fraud is a serious crime. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$500,000 or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.**

**Declaration and signature**

I am the president, another officer, or an authorized agent of the corporation; a member or an authorized agent of the partnership; or another individual serving as a representative of the debtor in this case.

I have examined the information in the documents checked below and I have a reasonable belief that the information is true and correct:

- ☒ *Schedule A/B: Assets—Real and Personal Property* (Official Form 206A/B)
- ☒ *Schedule D: Creditors Who Have Claims Secured by Property* (Official Form 206D)
- ☒ *Schedule E/F: Creditors Who Have Unsecured Claims* (Official Form 206E/F)
- ☒ *Schedule G: Executory Contracts and Unexpired Leases* (Official Form 206G)
- ☒ *Schedule H: Codebtors* (Official Form 206H)
- ☒ *Summary of Assets and Liabilities for Non-Individuals* (Official Form 206Sum)
- ☐ *Amended Schedule*
- ☐ *Chapter 11 or Chapter 9 Cases: List of Creditors Who Have the 20 Largest Unsecured Claims and Are Not Insiders* (Official Form 204)
- ☐ Other document that requires a declaration \_\_\_\_\_

I declare under penalty of perjury that the foregoing is true and correct.

Executed on June 20, 2024

X /s/ Jacob Crabtree

Signature of individual signing on behalf of debtor

Jacob Crabtree

Printed name

CEO

Position or relationship to debtor

**Fill in this information to identify the case:**Debtor name **CHTC Inc.**United States Bankruptcy Court for the: **DISTRICT OF OREGON**

Case number (if known) \_\_\_\_\_

☐ Check if this is an amended filing**Official Form 206Sum  
Summary of Assets and Liabilities for Non-Individuals****12/15****Part 1: Summary of Assets****1. Schedule A/B: Assets-Real and Personal Property** (Official Form 206A/B)**1a. Real property:**Copy line 88 from *Schedule A/B*..... \$ **0.00****1b. Total personal property:**Copy line 91A from *Schedule A/B*..... \$ **1,534,657.00****1c. Total of all property:**Copy line 92 from *Schedule A/B*..... \$ **1,534,657.00****Part 2: Summary of Liabilities****2. Schedule D: Creditors Who Have Claims Secured by Property** (Official Form 206D)Copy the total dollar amount listed in Column A, *Amount of claim*, from line 3 of *Schedule D*..... \$ **189,000.00****3. Schedule E/F: Creditors Who Have Unsecured Claims** (Official Form 206E/F)**3a. Total claim amounts of priority unsecured claims:**Copy the total claims from Part 1 from line 5a of *Schedule E/F*..... \$ **203,357.00****3b. Total amount of claims of nonpriority amount of unsecured claims:**Copy the total of the amount of claims from Part 2 from line 5b of *Schedule E/F*..... +\$ **11,910,999.00****4. Total liabilities** .....  
Lines 2 + 3a + 3b\$ **12,303,356.00**



**Fill in this information to identify the case:**Debtor name **CHTC Inc.**United States Bankruptcy Court for the: **DISTRICT OF OREGON**

Case number (if known) \_\_\_\_\_

☐ Check if this is an amended filing**Official Form 206A/B****Schedule A/B: Assets - Real and Personal Property**

12/15

Disclose all property, real and personal, which the debtor owns or in which the debtor has any other legal, equitable, or future interest. Include all property in which the debtor holds rights and powers exercisable for the debtor's own benefit. Also include assets and properties which have no book value, such as fully depreciated assets or assets that were not capitalized. In Schedule A/B, list any executory contracts or unexpired leases. Also list them on *Schedule G: Executory Contracts and Unexpired Leases* (Official Form 206G).

Be as complete and accurate as possible. If more space is needed, attach a separate sheet to this form. At the top of any pages added, write the debtor's name and case number (if known). Also identify the form and line number to which the additional information applies. If an additional sheet is attached, include the amounts from the attachment in the total for the pertinent part.

For Part 1 through Part 11, list each asset under the appropriate category or attach separate supporting schedules, such as a fixed asset schedule or depreciation schedule, that gives the details for each asset in a particular category. List each asset only once. In valuing the debtor's interest, do not deduct the value of secured claims. See the instructions to understand the terms used in this form.

**Part 1: Cash and cash equivalents****1. Does the debtor have any cash or cash equivalents?**☐ No. Go to Part 2.☒ Yes Fill in the information below.**All cash or cash equivalents owned or controlled by the debtor****Current value of debtor's interest****3. Checking, savings, money market, or financial brokerage accounts (Identify all)**

Name of institution (bank or brokerage firm)

Type of account

Last 4 digits of account number

3.1. **Chase Bank Account****Business Checking****\$0.00****4. Other cash equivalents (Identify all)****5. Total of Part 1.**

Add lines 2 through 4 (including amounts on any additional sheets). Copy the total to line 80.

**\$0.00****Part 2: Deposits and Prepayments****6. Does the debtor have any deposits or prepayments?**☐ No. Go to Part 3.☒ Yes Fill in the information below.**7. Deposits, including security deposits and utility deposits**

Description, including name of holder of deposit

7.1. **Chase Savings Bank Account****\$0.00****8. Prepayments, including prepayments on executory contracts, leases, insurance, taxes, and rent**

Description, including name of holder of prepayment

**9. Total of Part 2.**

Add lines 7 through 8. Copy the total to line 81.

**\$0.00**

Debtor CHTC Inc.  
Name

Case number (If known) \_\_\_\_\_

**Part 3: Accounts receivable**

**10. Does the debtor have any accounts receivable?**

- ☐ No. Go to Part 4.  
☒ Yes Fill in the information below.

**11. Accounts receivable**

11b. Over 90 days old: 133,327.00 - 0.00 = .... \$133,327.00  
face amount doubtful or uncollectible accounts

**12. Total of Part 3.**

Current value on lines 11a + 11b = line 12. Copy the total to line 82.

\$133,327.00

**Part 4: Investments**

**13. Does the debtor own any investments?**

- ☐ No. Go to Part 5.  
☒ Yes Fill in the information below.

			Valuation method used for current value	Current value of debtor's interest
14.	<b>Mutual funds or publicly traded stocks not included in Part 1</b>			
	Name of fund or stock:			
	<b>Stock on Balance Sheet for Australian Company Bontinic</b>			
14.1.	<b>Wellness Limited - Book Value</b>			<b>\$804,000.00</b>
15.	<b>Non-publicly traded stock and interests in incorporated and unincorporated businesses, including any interest in an LLC, partnership, or joint venture</b>			
	Name of entity:	% of ownership		
15.1.	<b>55% ownership of Captain Co-Pack, LLC - No balance sheet value</b>	<b>55</b>	<b>%</b>	<b>\$0.00</b>
15.2.	<b>100% Ownership of Bloomcraft, Inc - No Balance Sheet Value - not operating</b>	<b>100</b>	<b>%</b>	<b>Liquidation</b>
15.3.	<b>Columbia 410, LLC - No Balance sheet Value</b>	<b>100</b>	<b>%</b>	<b>Liquidation</b>
15.4.	<b>Applied Discoveries, LLC - No Balance sheet value</b>	<b>50</b>	<b>%</b>	<b>Liquidation</b>
15.5.	<b>Applied Discoveries, Inc - No Balance Sheet Value</b>	<b>50</b>	<b>%</b>	<b>Liquidation</b>
16.	<b>Government bonds, corporate bonds, and other negotiable and non-negotiable instruments not included in Part 1</b>			
	Describe:			

Debtor CHTC Inc.  
Name

Case number (If known) \_\_\_\_\_

17. **Total of Part 4.**

Add lines 14 through 16. Copy the total to line 83.

**\$804,000.00**

**Part 5: Inventory, excluding agriculture assets**

18. **Does the debtor own any inventory (excluding agriculture assets)?**

- ☒ No. Go to Part 6.  
☐ Yes Fill in the information below.

**Part 6: Farming and fishing-related assets (other than titled motor vehicles and land)**

27. **Does the debtor own or lease any farming and fishing-related assets (other than titled motor vehicles and land)?**

- ☒ No. Go to Part 7.  
☐ Yes Fill in the information below.

**Part 7: Office furniture, fixtures, and equipment; and collectibles**

38. **Does the debtor own or lease any office furniture, fixtures, equipment, or collectibles?**

- ☒ No. Go to Part 8.  
☐ Yes Fill in the information below.

**Part 8: Machinery, equipment, and vehicles**

46. **Does the debtor own or lease any machinery, equipment, or vehicles?**

- ☒ No. Go to Part 9.  
☐ Yes Fill in the information below.

**Part 9: Real property**

54. **Does the debtor own or lease any real property?**

- ☒ No. Go to Part 10.  
☐ Yes Fill in the information below.

**Part 10: Intangibles and intellectual property**

59. **Does the debtor have any interests in intangibles or intellectual property?**

- ☒ No. Go to Part 11.  
☐ Yes Fill in the information below.

**Part 11: All other assets**

70. **Does the debtor own any other assets that have not yet been reported on this form?**

Include all interests in executory contracts and unexpired leases not previously reported on this form.

- ☐ No. Go to Part 12.  
☒ Yes Fill in the information below.

**Current value of  
debtor's interest**

71. **Notes receivable**  
Description (include name of obligor)

Debtor CHTC Inc. Case number (If known) \_\_\_\_\_  
Name

Interest in ongoing sale proceeds pursuant to April 4, 2024 contract for sale of equipment and assets to Solida Labs Inc.	<u>597,330.00</u>	-	<u>0.00</u>	=	
	Total face amount		doubtful or uncollectible amount		
					<u>\$597,330.00</u>

72. Tax refunds and unused net operating losses (NOLs)  
Description (for example, federal, state, local)

73. Interests in insurance policies or annuities

74. Causes of action against third parties (whether or not a lawsuit has been filed)

75. Other contingent and unliquidated claims or causes of action of every nature, including counterclaims of the debtor and rights to set off claims

76. Trusts, equitable or future interests in property

77. Other property of any kind not already listed Examples: Season tickets, country club membership

78. Total of Part 11.  
Add lines 71 through 77. Copy the total to line 90.

79. Has any of the property listed in Part 11 been appraised by a professional within the last year?  
☒ No  
☐ Yes
- \$597,330.00

Debtor **CHTC Inc.**  
Name

Case number (If known)

**Part 12: Summary**

In Part 12 copy all of the totals from the earlier parts of the form

Type of property	Current value of personal property	Current value of real property
80. <b>Cash, cash equivalents, and financial assets.</b> <i>Copy line 5, Part 1</i>	<u>\$0.00</u>	
81. <b>Deposits and prepayments.</b> <i>Copy line 9, Part 2.</i>	<u>\$0.00</u>	
82. <b>Accounts receivable.</b> <i>Copy line 12, Part 3.</i>	<u>\$133,327.00</u>	
83. <b>Investments.</b> <i>Copy line 17, Part 4.</i>	<u>\$804,000.00</u>	
84. <b>Inventory.</b> <i>Copy line 23, Part 5.</i>	<u>\$0.00</u>	
85. <b>Farming and fishing-related assets.</b> <i>Copy line 33, Part 6.</i>	<u>\$0.00</u>	
86. <b>Office furniture, fixtures, and equipment; and collectibles.</b> <i>Copy line 43, Part 7.</i>	<u>\$0.00</u>	
87. <b>Machinery, equipment, and vehicles.</b> <i>Copy line 51, Part 8.</i>	<u>\$0.00</u>	
88. <b>Real property.</b> <i>Copy line 56, Part 9.....&gt;</i>		<u>\$0.00</u>
89. <b>Intangibles and intellectual property.</b> <i>Copy line 66, Part 10.</i>	<u>\$0.00</u>	
90. <b>All other assets.</b> <i>Copy line 78, Part 11.</i>	+ <u>\$597,330.00</u>	
91. <b>Total.</b> Add lines 80 through 90 for each column	<u>\$1,534,657.00</u>	+ 91b. <u>\$0.00</u>
92. <b>Total of all property on Schedule A/B.</b> Add lines 91a+91b=92		<u>\$1,534,657.00</u>

**Fill in this information to identify the case:**Debtor name **CHTC Inc.**United States Bankruptcy Court for the: **DISTRICT OF OREGON**

Case number (if known) \_\_\_\_\_

☐ Check if this is an amended filing**Official Form 206D****Schedule D: Creditors Who Have Claims Secured by Property****12/15**

Be as complete and accurate as possible.

**1. Do any creditors have claims secured by debtor's property?**

- ☐ No. Check this box and submit page 1 of this form to the court with debtor's other schedules. Debtor has nothing else to report on this form.
- ☒ Yes. Fill in all of the information below.

**Part 1: List Creditors Who Have Secured Claims****2. List in alphabetical order all creditors who have secured claims.** If a creditor has more than one secured claim, list the creditor separately for each claim.

		Column A Amount of claim  Do not deduct the value of collateral.	Column B Value of collateral that supports this claim	
<b>2.1</b>	<b>Clackamas County Assessor</b> Creditor's Name  <b>150 Beavercreek Rd</b> <b>Oregon City, OR 97045</b> Creditor's mailing address  Creditor's email address, if known  Date debt was incurred <b>7/2023</b> Last 4 digits of account number  Do multiple creditors have an interest in the same property? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes. Specify each creditor, including this creditor and its relative priority.	<b>Describe debtor's property that is subject to a lien</b> <b>Business Assets - Tax Warrant</b>  <b>Describe the lien</b> <b>Tax Lien</b> Is the creditor an insider or related party? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes Is anyone else liable on this claim? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes. Fill out <i>Schedule H: Codebtors</i> (Official Form 206H)  As of the petition filing date, the claim is: Check all that apply <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	<b>\$14,000.00</b>	<b>\$0.00</b>
<b>2.2</b>	<b>SBA Portland District</b> Creditor's Name <b>Bankruptcy Notice</b> <b>419 SW 11th Avenue, Suite 310</b> <b>Portland, OR 97205-2605</b> Creditor's mailing address  Creditor's email address, if known  Date debt was incurred <b>7/2020</b> Last 4 digits of account number	<b>Describe debtor's property that is subject to a lien</b> <b>All business assets</b>  <b>Describe the lien</b> <b>UCC Filing</b> Is the creditor an insider or related party? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes Is anyone else liable on this claim? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes. Fill out <i>Schedule H: Codebtors</i> (Official Form 206H)	<b>\$175,000.00</b>	<b>\$0.00</b>

**Do multiple creditors have an interest in the same property?**  
☒ No  
☐ Yes. Specify each creditor, including this creditor and its relative priority.

**As of the petition filing date, the claim is:**  
Check all that apply  
☐ Contingent  
☐ Unliquidated  
☐ Disputed

3. Total of the dollar amounts from Part 1, Column A, including the amounts from the Additional Page, if any.

\$189,000.00

**Part 2: List Others to Be Notified for a Debt Already Listed in Part 1**

List in alphabetical order any others who must be notified for a debt already listed in Part 1. Examples of entities that may be listed are collection agencies, assignees of claims listed above, and attorneys for secured creditors.

If no others need to notified for the debts listed in Part 1, do not fill out or submit this page. If additional pages are needed, copy this page.

Name and address	On which line in Part 1 did you enter the related creditor?	Last 4 digits of account number for this entity
SBA 1545 Hawkins Blvd Suite 202 EL El Paso, TX 79925	Line <u>2.2</u>	
US Attorney -Oregon Attn: Civil Process Clerk 1000 SW 3rd Ave., #600 Portland, OR 97204	Line <u>2.2</u>	
US Attorney General Attn: Merrick Garland 950 Pennsylvania Avenue, NW Washington, DC 20530-0001	Line <u>2.2</u>	

**Fill in this information to identify the case:**Debtor name **CHTC Inc.**United States Bankruptcy Court for the: **DISTRICT OF OREGON**

Case number (if known) \_\_\_\_\_

☐ Check if this is an amended filing**Official Form 206E/F****Schedule E/F: Creditors Who Have Unsecured Claims**

12/15

Be as complete and accurate as possible. Use Part 1 for creditors with PRIORITY unsecured claims and Part 2 for creditors with NONPRIORITY unsecured claims. List the other party to any executory contracts or unexpired leases that could result in a claim. Also list executory contracts on *Schedule A/B: Assets - Real and Personal Property* (Official Form 206A/B) and on *Schedule G: Executory Contracts and Unexpired Leases* (Official Form 206G). Number the entries in Parts 1 and 2 in the boxes on the left. If more space is needed for Part 1 or Part 2, fill out and attach the Additional Page of that Part included in this form.

**Part 1: List All Creditors with PRIORITY Unsecured Claims****1. Do any creditors have priority unsecured claims?** (See 11 U.S.C. § 507).☐ No. Go to Part 2.☒ Yes. Go to line 2.**2. List in alphabetical order all creditors who have unsecured claims that are entitled to priority in whole or in part.** If the debtor has more than 3 creditors with priority unsecured claims, fill out and attach the Additional Page of Part 1.

			Total claim	Priority amount
2.1	Priority creditor's name and mailing address <b>Benton County Assessment Office P.O. Box 3020 Corvallis, OR 97339</b>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	<b>\$119,250.00</b>	<b>\$119,250.00</b>
	Date or dates debt was incurred <b>2021</b>	Basis for the claim: <b>back owed taxes</b>		
	Last 4 digits of account number <b>2254</b>	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		
	Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (8)			
2.2	Priority creditor's name and mailing address <b>Clackamas County Tax Collector Bankruptcy Department 150 Beaver Creek Road Oregon City, OR 97045</b>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	<b>\$13,825.00</b>	<b>\$13,825.00</b>
	Date or dates debt was incurred <b>2020</b>	Basis for the claim: <b>Back owed taxes</b>		
	Last 4 digits of account number <b>5411</b>	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		
	Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (8)			



Debtor	<b>CHTC Inc.</b> Name	Case number (if known)
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2.3	Priority creditor's name and mailing address <b>Internal Revenue Service</b> <b>Bankruptcy Notices</b> <b>PO Box 7346</b> <b>Philadelphia, PA 19101-7346</b>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	<b>Unknown</b>	<b>\$154,000.00</b>
Date or dates debt was incurred		Basis for the claim: <b>Taxes</b>		
Last 4 digits of account number Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (8)		Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		

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2.4	Priority creditor's name and mailing address <b>Lane County Tax Assessor</b> <b>C/O Michael Cowles, Assessor</b> <b>125 East 8th Avenue</b> <b>Eugene, OR 97401</b>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	<b>Unknown</b>	<b>\$0.00</b>
Date or dates debt was incurred		Basis for the claim: <b>Precautionary</b>		
Last 4 digits of account number Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (8)		Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		

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2.5	Priority creditor's name and mailing address <b>Oregon Department Of Revenue</b> <b>Bankruptcy Notice Dept.</b> <b>955 Center Street, NE</b> <b>Salem, OR 97301-2555</b>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	<b>\$70,282.00</b>	<b>\$0.00</b>
Date or dates debt was incurred <b>2019 - 2022</b>		Basis for the claim: <b>Payroll Withholding for 2019 - 2022</b>		
Last 4 digits of account number <b>5888</b> Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (8)		Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		

**Part 2: List All Creditors with NONPRIORITY Unsecured Claims**

3. List in alphabetical order all of the creditors with nonpriority unsecured claims. If the debtor has more than 6 creditors with nonpriority unsecured claims, fill out and attach the Additional Page of Part 2.

			<b>Amount of claim</b>	
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3.1	Nonpriority creditor's name and mailing address <b>Admiral Insurance</b> <b>1000 Howard Blvd</b> <b>Suite 300</b> <b>Mount Laurel, NJ 08054</b> Date(s) debt was incurred <b>2022</b> Last 4 digits of account number <b>0003</b>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <b>Misc. Business Debt</b> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$9,629.00</b>	
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3.2	Nonpriority creditor's name and mailing address <b>Arable Botanicals</b> <b>305 N. Ave</b> <b>Yakima, WA 98902</b> Date(s) debt was incurred <b>n/a</b> Last 4 digits of account number <b>n/a</b>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <b>Misc. Business Debt</b> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$209,000.00</b>	
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Name

3.3	Nonpriority creditor's name and mailing address <b>Avantor</b> <b>100 Matsonford Road</b> <b>Wayne, PA 19087</b> Date(s) debt was incurred <u>n/a</u> Last 4 digits of account number <u>0454</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Misc. Business Debt</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$430.00</b>
3.4	Nonpriority creditor's name and mailing address <b>BBMG LLC</b> <b>3300 NW 185th Ave, #163</b> <b>Portland, OR 97229</b> Date(s) debt was incurred <u>n/a</u> Last 4 digits of account number <u>n/a</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Investor</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$577,500.00</b>
3.5	Nonpriority creditor's name and mailing address <b>Blackthorn Law Group LLP</b> <b>1725 I St NW</b> <b>Suite 300</b> <b>Washington, DC 20006</b> Date(s) debt was incurred <u>2021</u> Last 4 digits of account number <u>n/a</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Misc. Business Debt</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$16,251.00</b>
3.6	Nonpriority creditor's name and mailing address <b>Blue Heron Investments</b> <b>1509 SW Sunset Blvd. Ste. 2B</b> <b>Portland, OR 97239</b> Date(s) debt was incurred <u>n/a</u> Last 4 digits of account number <u>n/a</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Investor</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$295,565.00</b>
3.7	Nonpriority creditor's name and mailing address <b>C&amp;S Fire Services</b> <b>4019 Hooker Rd</b> <b>Roseburg, OR 97470</b> Date(s) debt was incurred <u>n/a</u> Last 4 digits of account number <u>n/a</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Misc. Business Debt</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$600.00</b>
3.8	Nonpriority creditor's name and mailing address <b>Carney Bradley Spellman</b> <b>701 5th Ave</b> <b>Suite 3600</b> <b>Seattle, WA 98104</b> Date(s) debt was incurred <u>2019</u> Last 4 digits of account number <u>T001</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Misc. Business Debt</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$21,197.00</b>
3.9	Nonpriority creditor's name and mailing address <b>Chase Bank</b> <b>Bankruptcy Notices</b> <b>PO Box 15298</b> <b>Wilmington, DE 19850-5298</b> Date(s) debt was incurred <u>2021</u> Last 4 digits of account number <u>8184</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Misc. Business Debt</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$66,084.00</b>

Name

3.10	<b>Nonpriority creditor's name and mailing address</b> <b>Clara Wiley</b> <b>PO Box 10929</b> <b>Pasco, WA 99302</b> Date(s) debt was incurred <u>n/a</u> Last 4 digits of account number <u>5104</u>	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed <b>Basis for the claim:</b> <u>Misc. Business Debt</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$11,290.00</b>
3.11	<b>Nonpriority creditor's name and mailing address</b> <b>Columbia Foods Labs</b> <b>12423 NE Whitaker Way</b> <b>Portland, OR 97230</b> Date(s) debt was incurred <u>2023</u> Last 4 digits of account number <u>CHTC Inc</u>	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed <b>Basis for the claim:</b> <u>Misc. Business Debt</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$1,745.00</b>
3.12	<b>Nonpriority creditor's name and mailing address</b> <b>Comcast Corporation</b> <b>Comcast Center</b> <b>1701 JFK Boulevard</b> <b>Philadelphia, PA 19103</b> Date(s) debt was incurred <u>n/a</u> Last 4 digits of account number <u>0156</u>	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed <b>Basis for the claim:</b> <u>Misc. Business Debt</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$1,652.00</b>
3.13	<b>Nonpriority creditor's name and mailing address</b> <b>Commercial Collection Corp of NY, Inc</b> <b>PO Box 288</b> <b>Tonawanda, NY 14151</b> Date(s) debt was incurred <u>2023</u> Last 4 digits of account number <u>9215</u>	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed <b>Basis for the claim:</b> <u>Misc. Business Debt</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$42,132.00</b>
3.14	<b>Nonpriority creditor's name and mailing address</b> <b>Corvallis Rental</b> <b>1245 SE 3rd St</b> <b>Corvallis, OR 97333</b> Date(s) debt was incurred <u>2023</u> Last 4 digits of account number <u>8964</u>	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed <b>Basis for the claim:</b> <u>Misc. Business Debt</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$9,914.00</b>
3.15	<b>Nonpriority creditor's name and mailing address</b> <b>Credit Control, LLC</b> <b>3300 Rider Trail S, #500</b> <b>Earth City, MO 63045</b> Date(s) debt was incurred <u>n/a</u> Last 4 digits of account number <u>6145</u>	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed <b>Basis for the claim:</b> <u>Misc. Business Debt</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$66,084.00</b>
3.16	<b>Nonpriority creditor's name and mailing address</b> <b>Creekside Valley Farms, LLC</b> <b>4570 SE Lafayette Hwy</b> <b>Dayton, OR 97114</b> Date(s) debt was incurred <u>n/a</u> Last 4 digits of account number <u>n/a</u>	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed <b>Basis for the claim:</b> <u>Judgment for Business Debt - Case No. 20CV37333</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$2,155,482.00</b>

	Debtor <b>CHTC Inc.</b> Name	Case number (if known)
3.17	<b>Nonpriority creditor's name and mailing address</b> <b>Crosswater Strategies</b> <b>525 3rd St Ste 200</b> <b>Lake Oswego, OR 97034</b> Date(s) debt was incurred <u>2020</u> Last 4 digits of account number <u>CHTCInc</u>	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed <b>Basis for the claim:</b> <u>Misc. Business Debt</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
		<b>\$5,000.00</b>
3.18	<b>Nonpriority creditor's name and mailing address</b> <b>Culligan by Waterco</b> <b>9399 W Higgins Rd Ste 1100</b> <b>Rosemont, IL 60018</b> Date(s) debt was incurred <u>10/31/2020</u> Last 4 digits of account number <u>6201</u>	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed <b>Basis for the claim:</b> <u>Misc. Business Debt</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
		<b>\$607.00</b>
3.19	<b>Nonpriority creditor's name and mailing address</b> <b>Davis &amp; Jones LLC</b> <b>2521 Brown Blvd</b> <b>Arlington, TX 76006</b> Date(s) debt was incurred <u>2/6/2024</u> Last 4 digits of account number <u>9711</u>	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed <b>Basis for the claim:</b> <u>Misc. Business Debt</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
		<b>\$12,500.00</b>
3.20	<b>Nonpriority creditor's name and mailing address</b> <b>Deschutes Labs</b> <b>2020 NW Industrial Park Rd</b> <b>Prineville, OR 97754</b> Date(s) debt was incurred <u>          </u> Last 4 digits of account number <u>          </u>	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed <b>Basis for the claim:</b> <u>Misc. Business Debt</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
		<b>\$66,600.00</b>
3.21	<b>Nonpriority creditor's name and mailing address</b> <b>Douglass Nueman</b> <b>951 Emigrant creek Road</b> <b>Ashland, OR 97520</b> Date(s) debt was incurred <u>n/a</u> Last 4 digits of account number <u>n/a</u>	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed <b>Basis for the claim:</b> <u>Investor</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
		<b>\$586,643.00</b>
3.22	<b>Nonpriority creditor's name and mailing address</b> <b>ESSG</b> <b>7201 Metro Blvd Ste 900</b> <b>Minneapolis, MN 55439</b> Date(s) debt was incurred <u>1/1/2020</u> Last 4 digits of account number <u>1762</u>	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed <b>Basis for the claim:</b> <u>Misc. Business Debt</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
		<b>\$35,700.00</b>
3.23	<b>Nonpriority creditor's name and mailing address</b> <b>Eugene Central Services</b> <b>101 W 10th Ave Ste 203</b> <b>Eugene, OR 97401</b> Date(s) debt was incurred <u>          </u> Last 4 digits of account number <u>          </u>	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed <b>Basis for the claim:</b> <u>Payroll tax - precautionary</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
		<b>\$0.00</b>

Name

3.24	<b>Nonpriority creditor's name and mailing address</b> <b>Ferral Gas</b> <b>7500 College Blvd. STe 1000</b> <b>Overland Park, KS 66210</b> Date(s) debt was incurred <u>2/22/22</u> Last 4 digits of account number <u>5466</u>	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed <b>Basis for the claim:</b> <u>Misc. Business Debt</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$4,800.00</b>
3.25	<b>Nonpriority creditor's name and mailing address</b> <b>Gary Zipfel</b> <b>1551 Penstemon Ct.</b> <b>Grayslake, IL 60030</b> Date(s) debt was incurred <u>n/a</u> Last 4 digits of account number <u>n/a</u>	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed <b>Basis for the claim:</b> <u>Investor</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$245,833.00</b>
3.26	<b>Nonpriority creditor's name and mailing address</b> <b>Gracie Holdings LLC</b> <b>1509 SW Sunset Blvd, Suite 2B</b> <b>Portland, OR 97239</b> Date(s) debt was incurred <u>n/a</u> Last 4 digits of account number <u>n/a</u>	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed <b>Basis for the claim:</b> <u>Investor</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$250,000.00</b>
3.27	<b>Nonpriority creditor's name and mailing address</b> <b>GVB Biopharma</b> <b>4456 E Craid Rd</b> <b>Las Vegas, NV 89115</b> Date(s) debt was incurred <u>  </u> Last 4 digits of account number <u>  </u>	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed <b>Basis for the claim:</b> <u>Misc. Business Debt</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$89,400.00</b>
3.28	<b>Nonpriority creditor's name and mailing address</b> <b>High Octane Trading</b> <b>1925 Eagle Nest Circle NW</b> <b>Albany, OR 97321</b> Date(s) debt was incurred <u>4/8/2020</u> Last 4 digits of account number <u>  </u>	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed <b>Basis for the claim:</b> <u>Misc. Business Debt</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$850.00</b>
3.29	<b>Nonpriority creditor's name and mailing address</b> <b>Honey Bucket</b> <b>1685 McGilchrist St SE</b> <b>Portland, OR 97218</b> Date(s) debt was incurred <u>2021</u> Last 4 digits of account number <u>4928</u>	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed <b>Basis for the claim:</b> <u>Misc. Business Debt</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$1,155.00</b>
3.30	<b>Nonpriority creditor's name and mailing address</b> <b>Hudson Valley Farms</b> <b>7425 Riverside Dr S</b> <b>Salem, OR 97306</b> Date(s) debt was incurred <u>9/11/2020</u> Last 4 digits of account number <u>  </u>	<b>As of the petition filing date, the claim is:</b> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed <b>Basis for the claim:</b> <u>Misc. Business Debt</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$7,000.00</b>

Name

3.31	Nonpriority creditor's name and mailing address <b>I2CG-Hood</b> <b>8341 N Dickens St</b> <b>Portland, OR 97203</b> Date(s) debt was incurred <u>6/1/2021</u> Last 4 digits of account number <u>CHTC</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Investor</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<u>\$51,410.00</u>
3.32	Nonpriority creditor's name and mailing address <b>Industrial Source</b> <b>3500 Commerical Ave</b> <b>Springfield, OR 97478</b> Date(s) debt was incurred <u>12/10/2019</u> Last 4 digits of account number <u>7026</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Misc. Business Debt</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<u>\$32,300.00</u>
3.33	Nonpriority creditor's name and mailing address <b>Ingold Law, PLLC</b> <b>5555 Main St.</b> <b>Buffalo, NY 14221</b> Date(s) debt was incurred <u>  </u> Last 4 digits of account number <u>  </u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Misc. Business Debt</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<u>Unknown</u>
3.34	Nonpriority creditor's name and mailing address <b>Jive Communications</b> <b>313 E 1200 S</b> <b>Orem, UT 84058</b> Date(s) debt was incurred <u>2020</u> Last 4 digits of account number <u>1908</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Misc. Business Debt</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<u>\$3,635.00</u>
3.35	Nonpriority creditor's name and mailing address <b>Klarquist Sparkman, LLP</b> <b>Attn: Bankruptcy Department</b> <b>121 SW Salmon Street, Suite 1600</b> <b>Portland, OR 97204-2988</b> Date(s) debt was incurred <u>8/2020</u> Last 4 digits of account number <u>0008</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Misc. Business Debt</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<u>\$3,710.00</u>
3.36	Nonpriority creditor's name and mailing address <b>Kurt Bosshard</b> <b>3144 Elua Street</b> <b>Lihue, HI 96766</b> Date(s) debt was incurred <u>n/a</u> Last 4 digits of account number <u>n/a</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Investor</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<u>\$5,002,630.00</u>
3.37	Nonpriority creditor's name and mailing address <b>Landry and Jacobs LLC</b> <b>50 N Laura St Ste 2500</b> <b>Jacksonville, FL 32202</b> Date(s) debt was incurred <u>2023</u> Last 4 digits of account number <u>4510</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Misc. Business Debt</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<u>\$75.00</u>

Name

3.38	Nonpriority creditor's name and mailing address <b>Leviton Law Firm LTD</b> <b>One Pierce Place</b> <b>Ste 725W</b> <b>Itasca, IL 60143</b> Date(s) debt was incurred <u>6/2023</u> Last 4 digits of account number <u>0575</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Misc. Business Debt</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<u>\$9,650.00</u>
3.39	Nonpriority creditor's name and mailing address <b>Mammoth Farms</b> <b>17281 S Clackamas River Dr</b> <b>Oregon City, OR 97045</b> Date(s) debt was incurred <u>        </u> Last 4 digits of account number <u>        </u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Misc. Business Debt</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<u>\$76,000.00</u>
3.40	Nonpriority creditor's name and mailing address <b>Marley's Movers</b> <b>945 Queen Ave SE</b> <b>Albany, OR 97322</b> Date(s) debt was incurred <u>        </u> Last 4 digits of account number <u>        </u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Misc. Business Debt</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<u>\$3,200.00</u>
3.41	Nonpriority creditor's name and mailing address <b>Maul Foster Alongi</b> <b>109 E 13th St</b> <b>Vancouver, WA 98660</b> Date(s) debt was incurred <u>6/2021</u> Last 4 digits of account number <u>0703</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Misc. Business Debt</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<u>\$1,500.00</u>
3.42	Nonpriority creditor's name and mailing address <b>MBS Farms</b> <b>24444 Holl Rd</b> <b>Malin, OR 97632</b> Date(s) debt was incurred <u>2/2020</u> Last 4 digits of account number <u>        </u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Misc. Business Debt</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<u>\$510.00</u>
3.43	Nonpriority creditor's name and mailing address <b>McKay Farms</b> <b>19172 French Prairie Rd NE</b> <b>Saint Paul, OR 97137</b> Date(s) debt was incurred <u>2/2022</u> Last 4 digits of account number <u>        </u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Misc. Business Debt</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<u>\$28,700.00</u>
3.44	Nonpriority creditor's name and mailing address <b>Mesh Communications</b> <b>3100 West Ray Rd.</b> <b>Chandler, AZ 85226</b> Date(s) debt was incurred <u>n/a</u> Last 4 digits of account number <u>n/a</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Investor</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<u>\$605,000.00</u>

Name

3.45	Nonpriority creditor's name and mailing address <b>Molalla Communications</b> <b>211 Robbins ST</b> <b>Molalla, OR 97038</b> Date(s) debt was incurred <u>2021</u> Last 4 digits of account number <u>9115</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Misc. Business Debt</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<u>\$950.00</u>
3.46	Nonpriority creditor's name and mailing address <b>Molalla Sanitary Service</b> <b>PO Box 1808</b> <b>Oregon City, OR 97045</b> Date(s) debt was incurred <u>2021</u> Last 4 digits of account number <u>9001</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Misc. Business Debt</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<u>\$4,600.00</u>
3.47	Nonpriority creditor's name and mailing address <b>Moss Adams</b> <b>805 Broadway</b> <b>Portland, OR 97205</b> Date(s) debt was incurred <u>7/2019</u> Last 4 digits of account number <u>7539</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Misc. Business Debt</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<u>\$41,375.00</u>
3.48	Nonpriority creditor's name and mailing address <b>NACM Commercial Svcs.</b> <b>606 N. Pines Rd., Suite 102</b> <b>Spokane, WA 99206</b> Date(s) debt was incurred <u>10/2022</u> Last 4 digits of account number <u>1953</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Misc. Business Debt</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<u>\$3,500.00</u>
3.49	Nonpriority creditor's name and mailing address <b>NACM Commercial Svcs.</b> <b>606 N. Pines Rd., Suite 102</b> <b>Spokane, WA 99206</b> Date(s) debt was incurred <u>7/2020</u> Last 4 digits of account number <u>4666</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Misc. Business Debt</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<u>\$1,430.00</u>
3.50	Nonpriority creditor's name and mailing address <b>Natures Garden</b> <b>10839 S Toliver Rd</b> <b>Molalla, OR 97038</b> Date(s) debt was incurred <u>9/2021</u> Last 4 digits of account number <u>  </u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Misc. Business Debt</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<u>\$610.00</u>
3.51	Nonpriority creditor's name and mailing address <b>NW Natural</b> <b>Bankruptcy Notice</b> <b>250 SW Taylor St.</b> <b>Portland, OR 97204</b> Date(s) debt was incurred <u>3/2021</u> Last 4 digits of account number <u>2093</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Misc. Business Debt</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<u>\$32,000.00</u>



Name

3.52	Nonpriority creditor's name and mailing address <b>Oregon Electric Service, LLC</b> <b>142 W 8th Ave</b> <b>Eugene, OR 97401</b> Date(s) debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <b>Precautionary</b> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>Unknown</b>
3.53	Nonpriority creditor's name and mailing address <b>Oregon Employment Department</b> <b>Employer Taxes</b> <b>875 Union Street NE, Room 107</b> <b>Salem, OR 97311</b> Date(s) debt was incurred <u>6/2022</u> Last 4 digits of account number <u>5568</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <b>Withholdings</b> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$38,630.00</b>
3.54	Nonpriority creditor's name and mailing address <b>PGE</b> <b>POB 4404</b> <b>Portland, OR 97208</b> Date(s) debt was incurred <u>12/2020</u> Last 4 digits of account number <u>2430</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <b>Misc. Business Debt</b> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$32,725.00</b>
3.55	Nonpriority creditor's name and mailing address <b>PJK</b> <b>39303 Shelburn Dr</b> <b>Scio, OR 97374</b> Date(s) debt was incurred <u>3/2021</u> Last 4 digits of account number <u>n/a</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <b>Misc. Business Debt</b> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$11,250.00</b>
3.56	Nonpriority creditor's name and mailing address <b>Republic Services</b> <b>PO Box 78829</b> <b>Phoenix, AZ 85062-8829</b> Date(s) debt was incurred <u>6/2021</u> Last 4 digits of account number <u>0067</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <b>Misc. Business Debt</b> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$5,235.00</b>
3.57	Nonpriority creditor's name and mailing address <b>Republic Services</b> <b>PO Box 78829</b> <b>Phoenix, AZ 85062-8829</b> Date(s) debt was incurred <u>2/2022</u> Last 4 digits of account number <u>3344</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <b>Misc. Business Debt</b> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$33,915.00</b>
3.58	Nonpriority creditor's name and mailing address <b>Republic Services</b> <b>PO Box 78829</b> <b>Phoenix, AZ 85062-8829</b> Date(s) debt was incurred <u>6/2021</u> Last 4 digits of account number <u>0155</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <b>Misc. Business Debt</b> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$15,240.00</b>

Debtor <b>CHTC Inc.</b> <small>Name</small>	Case number (if known) _____
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3.59	Nonpriority creditor's name and mailing address <b>Richard Miller</b> <b>PO Box 10168</b> <b>Richfield, ID 83349</b>  Date(s) debt was incurred <u>n/a</u> Last 4 digits of account number <u>n/a</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  Basis for the claim: <u>Investor</u>  Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$114,166.00</b>
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3.60	Nonpriority creditor's name and mailing address <b>SAIF Corporation</b> <b>400 High Street SE</b> <b>Salem, OR 97312-1000</b>  Date(s) debt was incurred <u>5/2022</u> Last 4 digits of account number <u>7223</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  Basis for the claim: <u>Misc. Business Debt</u>  Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$9,700.00</b>
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3.61	Nonpriority creditor's name and mailing address <b>Schwabe, Williamson &amp; Wyatt</b> <b>1211 SW 5th Ave Ste. 1900</b> <b>Portland, OR 97204</b>  Date(s) debt was incurred <u>2021</u> Last 4 digits of account number <u>4613</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  Basis for the claim: <u>Misc. Business Debt</u>  Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$25,225.00</b>
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3.62	Nonpriority creditor's name and mailing address <b>Sheldon Coleman</b> <b>2548 N Maize Ct. STE 106</b> <b>Wichita, KS 67205</b>  Date(s) debt was incurred <u>n/a</u> Last 4 digits of account number <u>n/a</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  Basis for the claim: <u>Investor</u>  Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$590,674.00</b>
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3.63	Nonpriority creditor's name and mailing address <b>Sullivan &amp; Terranova</b>  <b>10157 SW Barbur Blvd., Ste. 208C</b> <b>Portland, OR 97219</b>  Date(s) debt was incurred <u>n/a</u> Last 4 digits of account number <u>4253</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  Basis for the claim: <u>Misc. Business Debt</u>  Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$34,610.00</b>
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3.64	Nonpriority creditor's name and mailing address <b>Sunnyland Farms</b> <b>2314 Wilson Rd.</b> <b>Ashland, OR 97520</b>  Date(s) debt was incurred <u>5/2021</u> Last 4 digits of account number <u>n/a</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  Basis for the claim: <u>Misc. Business Debt</u>  Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$27,400.00</b>
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3.65	Nonpriority creditor's name and mailing address <b>Tarr, LLC</b> <b>POB 28324</b> <b>Portland, OR 97228</b>  Date(s) debt was incurred <u>3/2020</u> Last 4 digits of account number <u>3039</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed  Basis for the claim: <u>Misc. Business Debt</u>  Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$17,985.00</b>
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Name

3.66	Nonpriority creditor's name and mailing address <b>Toyota Lift Northwest</b> <b>PO Box 1400</b> <b>Portland, OR 97208</b> Date(s) debt was incurred <u>9/2022</u> Last 4 digits of account number <u>5825</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Misc. Business Debt</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$7,845.00</b>
3.67	Nonpriority creditor's name and mailing address <b>Transworld Systems, Inc.</b> <b>Bankruptcy Notice</b> <b>PO Box 15630</b> <b>Wilmington, DE 19850</b> Date(s) debt was incurred <u>n/a</u> Last 4 digits of account number <u>n/a</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Misc. Business Debt</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>Unknown</b>
3.68	Nonpriority creditor's name and mailing address <b>United Collection Bureau</b> <b>Bankruptcy Notices</b> <b>5620 Southwyck Blvd. Suite 206</b> <b>Toledo, OH 43614-1501</b> Date(s) debt was incurred <u>  </u> Last 4 digits of account number <u>n/a</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Misc. Business Debt</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>Unknown</b>
3.69	Nonpriority creditor's name and mailing address <b>US Water Services</b> <b>2588 Industry Lane</b> <b>Norristown, PA 19404</b> Date(s) debt was incurred <u>1/2020</u> Last 4 digits of account number <u>5190</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Misc. Business Debt</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$5,500.00</b>
3.70	Nonpriority creditor's name and mailing address <b>Viridian Sciences</b> <b>1550 Larimer St. #246</b> <b>Denver, CO 80202</b> Date(s) debt was incurred <u>1/2020</u> Last 4 digits of account number <u>5442</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Misc. Business Debt</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$133,305.00</b>
3.71	Nonpriority creditor's name and mailing address <b>Willamette Valley Growers</b> <b>1138 Willow Creek Dr NW</b> <b>Salem, OR 97304</b> Date(s) debt was incurred <u>5/2019</u> Last 4 digits of account number <u>n/a</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Misc. Business Debt</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$0.00</b>
3.72	Nonpriority creditor's name and mailing address <b>William Simpson</b> <b>13315 NE Airport Way #700</b> <b>Portland, OR 97230</b> Date(s) debt was incurred <u>n/a</u> Last 4 digits of account number <u>n/a</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Investor</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<b>\$114,166.00</b>

**Part 3: List Others to Be Notified About Unsecured Claims**

4. List in alphabetical order any others who must be notified for claims listed in Parts 1 and 2. Examples of entities that may be listed are collection agencies, assignees of claims listed above, and attorneys for unsecured creditors.

Debtor **CHTC Inc.**  
Name

Case number (if known)

If no others need to be notified for the debts listed in Parts 1 and 2, do not fill out or submit this page. If additional pages are needed, copy the next page.

	Name and mailing address	On which line in Part1 or Part 2 is the related creditor (if any) listed?	Last 4 digits of account number, if any
4.1	<b>Admiral Insurance</b> <b>PO Box 5430</b> <b>Mount Laurel, NJ 08054</b>	Line <u>3.1</u> <input type="checkbox"/> Not listed. Explain _____	—
4.2	<b>Bonneville Billing and Collections, Inc.</b> <b>Bankruptcy Notice</b> <b>PO Box 821449</b> <b>Vancouver, WA 98682</b>	Line <u>3.54</u> <input type="checkbox"/> Not listed. Explain _____	—
4.3	<b>Bonneville Billing and Collections, Inc.</b> <b>Bankruptcy Notice</b> <b>PO Box 821449</b> <b>Vancouver, WA 98682</b>	Line <u>3.51</u> <input type="checkbox"/> Not listed. Explain _____	—
4.4	<b>Bonneville Collections</b> <b>Bankruptcy Notice</b> <b>6026 Fashion Point Dr.</b> <b>Ogden, UT 84403</b>	Line <u>3.54</u> <input type="checkbox"/> Not listed. Explain _____	—
4.5	<b>Bonneville Collections</b> <b>Bankruptcy Notice</b> <b>PO Box 150621</b> <b>Ogden, UT 84415</b>	Line <u>3.51</u> <input type="checkbox"/> Not listed. Explain _____	—
4.6	<b>Brown Tarlow Bridges Palmer PC</b> <b>515 E 1st St</b> <b>Newberg, OR 97132</b>	Line <u>3.16</u> <input type="checkbox"/> Not listed. Explain _____	—
4.7	<b>Ellen F. Rosenblum, Attorney General</b> <b>100 Justice Building</b> <b>1162 Court St. NE</b> <b>Salem, OR 97310</b>	Line <u>2.5</u> <input type="checkbox"/> Not listed. Explain _____	—
4.8	<b>Oregon Electric Service, LLC</b> <b>2370 W 7th Pl</b> <b>Eugene, OR 97402</b>	Line <u>3.52</u> <input type="checkbox"/> Not listed. Explain _____	—
4.9	<b>Sunbelt Finance</b> <b>Bankruptcy Notices</b> <b>2900 Browns Lane</b> <b>Jonesboro, AR 72401</b>	Line <u>3.13</u> <input type="checkbox"/> Not listed. Explain _____	—
4.10	<b>Sunbelt Rentals</b> <b>2341 Deerfield Dr</b> <b>Fort Mill, SC 29715</b>	Line <u>3.63</u> <input type="checkbox"/> Not listed. Explain _____	<u>6340</u>
4.11	<b>US Attorney -Oregon</b> <b>Attn: Civil Process Clerk</b> <b>1000 SW 3rd Ave., #600</b> <b>Portland, OR 97204</b>	Line <u>2.3</u> <input type="checkbox"/> Not listed. Explain _____	—
4.12	<b>US Attorney General</b> <b>Attn: Merrick Garland</b> <b>950 Pennsylvania Avenue, NW</b> <b>Washington, DC 20530-0001</b>	Line <u>2.3</u> <input type="checkbox"/> Not listed. Explain _____	—

Debtor **CHTC Inc.**  
Name

Case number (if known)

**Part 4: Total Amounts of the Priority and Nonpriority Unsecured Claims**

5. Add the amounts of priority and nonpriority unsecured claims.

5a. Total claims from Part 1  
5b. Total claims from Part 2

5c. Total of Parts 1 and 2  
Lines 5a + 5b = 5c.

Total of claim amounts	
5a.	\$ 203,357.00
5b. +	\$ 11,910,999.00
5c.	\$ 12,114,356.00

Fill in this information to identify the case:

Debtor name CHTC Inc.

United States Bankruptcy Court for the: DISTRICT OF OREGON

Case number (if known) \_\_\_\_\_

☐ Check if this is an amended filing

Official Form 206G

**Schedule G: Executory Contracts and Unexpired Leases**

12/15

Be as complete and accurate as possible. If more space is needed, copy and attach the additional page, number the entries consecutively.

1. Does the debtor have any executory contracts or unexpired leases?

☐ No. Check this box and file this form with the debtor's other schedules. There is nothing else to report on this form.

☒ Yes. Fill in all of the information below even if the contacts of leases are listed on *Schedule A/B: Assets - Real and Personal* (Official Form 206A/B). *Property*

2. List all contracts and unexpired leases

State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease

2.1. State what the contract or lease is for and the nature of the debtor's interest **Asset/Sale Purchase Agreement for Equipment**

State the term remaining **Ends 3/31/2026**

List the contract number of any government contract \_\_\_\_\_

**Solida Labs  
4168 W. 1st Ave.  
Eugene, OR 97402**

Fill in this information to identify the case:

Debtor name CHTC Inc.

United States Bankruptcy Court for the: DISTRICT OF OREGON

Case number (if known) \_\_\_\_\_

☐ Check if this is an amended filing

## Official Form 206H Schedule H: Your Codebtors

12/15

Be as complete and accurate as possible. If more space is needed, copy the Additional Page, numbering the entries consecutively. Attach the Additional Page to this page.

**1. Do you have any codebtors?**

☐ No. Check this box and submit this form to the court with the debtor's other schedules. Nothing else needs to be reported on this form.

☒ Yes

**2. In Column 1, list as codebtors all of the people or entities who are also liable for any debts listed by the debtor in the schedules of creditors, Schedules D-G. Include all guarantors and co-obligors. In Column 2, identify the creditor to whom the debt is owed and each schedule on which the creditor is listed. If the codebtor is liable on a debt to more than one creditor, list each creditor separately in Column 2.**

Column 1: Codebtor

Column 2: Creditor

Name

Mailing Address

Name

Check all schedules that apply:

2.1 Jacob Scott  
Crabtree

4835 SE Anderegg Loop  
Portland, OR 97236  
CEO

Chase Bank

☐ D \_\_\_\_\_

☒ E/F 3.9

☐ G \_\_\_\_\_

**Fill in this information to identify the case:**Debtor name **CHTC Inc.**United States Bankruptcy Court for the: **DISTRICT OF OREGON**

Case number (if known) \_\_\_\_\_

☐ Check if this is an amended filing**Official Form 207****Statement of Financial Affairs for Non-Individuals Filing for Bankruptcy****04/22**

The debtor must answer every question. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write the debtor's name and case number (if known).

**Part 1: Income****1. Gross revenue from business**☐ None.**Identify the beginning and ending dates of the debtor's fiscal year, which may be a calendar year****From the beginning of the fiscal year to filing date:**From **1/01/2024** to **Filing Date****Sources of revenue**  
Check all that apply☒ Operating a business☐ Other \_\_\_\_\_**Gross revenue**  
(before deductions and exclusions)**\$498,003.00****For prior year:**From **1/01/2023** to **12/31/2023**☒ Operating a business☐ Other \_\_\_\_\_**\$3,868,236.00****For year before that:**From **1/01/2022** to **12/31/2022**☒ Operating a business☐ Other \_\_\_\_\_**\$2,652,489.00****2. Non-business revenue**

Include revenue regardless of whether that revenue is taxable. *Non-business income* may include interest, dividends, money collected from lawsuits, and royalties. List each source and the gross revenue for each separately. Do not include revenue listed in line 1.

☒ None.**Description of sources of revenue****Gross revenue from each source**  
(before deductions and exclusions)**Part 2: List Certain Transfers Made Before Filing for Bankruptcy****3. Certain payments or transfers to creditors within 90 days before filing this case**

List payments or transfers—including expense reimbursements—to any creditor, other than regular employee compensation, within 90 days before filing this case unless the aggregate value of all property transferred to that creditor is less than \$7,575. (This amount may be adjusted on 4/01/25 and every 3 years after that with respect to cases filed on or after the date of adjustment.)

☒ None.**Creditor's Name and Address****Dates****Total amount of value****Reasons for payment or transfer**  
*Check all that apply***4. Payments or other transfers of property made within 1 year before filing this case that benefited any insider**

List payments or transfers, including expense reimbursements, made within 1 year before filing this case on debts owed to an insider or guaranteed



or cosigned by an insider unless the aggregate value of all property transferred to or for the benefit of the insider is less than \$7,575. (This amount may be adjusted on 4/01/25 and every 3 years after that with respect to cases filed on or after the date of adjustment.) Do not include any payments listed in line 3. *Insiders* include officers, directors, and anyone in control of a corporate debtor and their relatives; general partners of a partnership debtor and their relatives; affiliates of the debtor and insiders of such affiliates; and any managing agent of the debtor. 11 U.S.C. § 101(31).

☐ None.

Insider's name and address Relationship to debtor	Dates	Total amount of value	Reasons for payment or transfer
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**5. Repossessions, foreclosures, and returns**

List all property of the debtor that was obtained by a creditor within 1 year before filing this case, including property repossessed by a creditor, sold at a foreclosure sale, transferred by a deed in lieu of foreclosure, or returned to the seller. Do not include property listed in line 6.

☐ None

Creditor's name and address	Describe of the Property	Date	Value of property
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**6. Setoffs**

List any creditor, including a bank or financial institution, that within 90 days before filing this case set off or otherwise took anything from an account of the debtor without permission or refused to make a payment at the debtor's direction from an account of the debtor because the debtor owed a debt.

☐ None

Creditor's name and address	Description of the action creditor took	Date action was taken	Amount
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**Part 3: Legal Actions or Assignments**

**7. Legal actions, administrative proceedings, court actions, executions, attachments, or governmental audits**

List the legal actions, proceedings, investigations, arbitrations, mediations, and audits by federal or state agencies in which the debtor was involved in any capacity—within 1 year before filing this case.

☐ None.

Case title Case number	Nature of case	Court or agency's name and address	Status of case
7.1. Oregon Electric Service, LLC v. CHTC et al. 23CV02791	Debt Collection	Lane County Circuit Court Attn: Civil Court Clerk 125 E. 8th Avenue Eugene, OR 97401	<input type="checkbox"/> Pending <input type="checkbox"/> On appeal <input checked="" type="checkbox"/> Concluded

**8. Assignments and receivership**

List any property in the hands of an assignee for the benefit of creditors during the 120 days before filing this case and any property in the hands of a receiver, custodian, or other court-appointed officer within 1 year before filing this case.

☐ None

**Part 4: Certain Gifts and Charitable Contributions**

**9. List all gifts or charitable contributions the debtor gave to a recipient within 2 years before filing this case unless the aggregate value of the gifts to that recipient is less than \$1,000**

☐ None

Recipient's name and address	Description of the gifts or contributions	Dates given	Value
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**Part 5: Certain Losses**

**10. All losses from fire, theft, or other casualty within 1 year before filing this case.**

☐ None

**Description of the property lost and how the loss occurred****Amount of payments received for the loss**

If you have received payments to cover the loss, for example, from insurance, government compensation, or tort liability, list the total received.

List unpaid claims on Official Form 106A/B (Schedule A/B: Assets – Real and Personal Property).

**Dates of loss****Value of property lost****Part 6: Certain Payments or Transfers****11. Payments related to bankruptcy**

List any payments of money or other transfers of property made by the debtor or person acting on behalf of the debtor within 1 year before the filing of this case to another person or entity, including attorneys, that the debtor consulted about debt consolidation or restructuring, seeking bankruptcy relief, or filing a bankruptcy case.

☐ None.

Who was paid or who received the transfer? Address	If not money, describe any property transferred	Dates	Total amount or value
11.1. Michael D. O'Brien, & Associates, P.C. 12909 SW 68th Parkway, Suite 160 Portland, OR 97223	Counsel was retained for negotiations with creditors and subsequently for Ch 7	Over the Prior year	\$14,009.00

Email or website address

Who made the payment, if not debtor?

**12. Self-settled trusts of which the debtor is a beneficiary**

List any payments or transfers of property made by the debtor or a person acting on behalf of the debtor within 10 years before the filing of this case to a self-settled trust or similar device.

Do not include transfers already listed on this statement.

☒ None.

Name of trust or device	Describe any property transferred	Dates transfers were made	Total amount or value
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**13. Transfers not already listed on this statement**

List any transfers of money or other property by sale, trade, or any other means made by the debtor or a person acting on behalf of the debtor within 2 years before the filing of this case to another person, other than property transferred in the ordinary course of business or financial affairs. Include both outright transfers and transfers made as security. Do not include gifts or transfers previously listed on this statement.

☐ None.

Who received transfer? Address	Description of property transferred or payments received or debts paid in exchange	Date transfer was made	Total amount or value
13.1 Solida Labs 4168 W. 1st Ave. Eugene, OR 97402	All business assets - subject to SBA Lien	4/4/2024	\$670,202.00
Relationship to debtor None			

**Part 7: Previous Locations****14. Previous addresses**

List all previous addresses used by the debtor within 3 years before filing this case and the dates the addresses were used.

☐ Does not apply

	Address	Dates of occupancy From-To
14.1.	<b>410 Industrial Way Molalla, OR 97038</b>	<b>4/2019 - 2022</b>
14.2.	<b>4515 NE Elliot Cr. Corvallis, OR 97330</b>	<b>2018 - 12/2021</b>

**Part 8: Health Care Bankruptcies****15. Health Care bankruptcies**

Is the debtor primarily engaged in offering services and facilities for:

- diagnosing or treating injury, deformity, or disease, or
- providing any surgical, psychiatric, drug treatment, or obstetric care?

- ☒ No. Go to Part 9.
- ☐ Yes. Fill in the information below.

Facility name and address	Nature of the business operation, including type of services the debtor provides	If debtor provides meals and housing, number of patients in debtor's care
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**Part 9: Personally Identifiable Information****16. Does the debtor collect and retain personally identifiable information of customers?**

- ☒ No.
- ☐ Yes. State the nature of the information collected and retained.

**17. Within 6 years before filing this case, have any employees of the debtor been participants in any ERISA, 401(k), 403(b), or other pension or profit-sharing plan made available by the debtor as an employee benefit?**

- ☒ No. Go to Part 10.
- ☐ Yes. Does the debtor serve as plan administrator?

**Part 10: Certain Financial Accounts, Safe Deposit Boxes, and Storage Units****18. Closed financial accounts**

Within 1 year before filing this case, were any financial accounts or instruments held in the debtor's name, or for the debtor's benefit, closed, sold, moved, or transferred?

Include checking, savings, money market, or other financial accounts; certificates of deposit; and shares in banks, credit unions, brokerage houses, cooperatives, associations, and other financial institutions.

☒ None

Financial Institution name and Address	Last 4 digits of account number	Type of account or instrument	Date account was closed, sold, moved, or transferred	Last balance before closing or transfer
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**19. Safe deposit boxes**

List any safe deposit box or other depository for securities, cash, or other valuables the debtor now has or did have within 1 year before filing this case.

☒ None

Depository institution name and address	Names of anyone with access to it Address	Description of the contents	Does debtor still have it?
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**20. Off-premises storage**

List any property kept in storage units or warehouses within 1 year before filing this case. Do not include facilities that are in a part of a building in which the debtor does business.

☒ None

Facility name and address	Names of anyone with access to it	Description of the contents	Does debtor still have it?
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**Part 11: Property the Debtor Holds or Controls That the Debtor Does Not Own****21. Property held for another**

List any property that the debtor holds or controls that another entity owns. Include any property borrowed from, being stored for, or held in trust. Do not list leased or rented property.

☐ None

Owner's name and address	Location of the property	Describe the property	Value
Kurt Bosshard	4168 W 1st Ave. Eugene, OR 97402	Various lab equipment	Unknown

**Part 12: Details About Environment Information**

For the purpose of Part 12, the following definitions apply:

*Environmental law* means any statute or governmental regulation that concerns pollution, contamination, or hazardous material, regardless of the medium affected (air, land, water, or any other medium).

*Site* means any location, facility, or property, including disposal sites, that the debtor now owns, operates, or utilizes or that the debtor formerly owned, operated, or utilized.

*Hazardous material* means anything that an environmental law defines as hazardous or toxic, or describes as a pollutant, contaminant, or a similarly harmful substance.

**Report all notices, releases, and proceedings known, regardless of when they occurred.**

**22. Has the debtor been a party in any judicial or administrative proceeding under any environmental law?** Include settlements and orders.

- ☒ No.  
☐ Yes. Provide details below.

Case title Case number	Court or agency name and address	Nature of the case	Status of case
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**23. Has any governmental unit otherwise notified the debtor that the debtor may be liable or potentially liable under or in violation of an environmental law?**

- ☐ No.  
☒ Yes. Provide details below.

Site name and address	Governmental unit name and address	Environmental law, if known	Date of notice
CHTC Inc. 410 Industrial Way Molalla, OR 97038	Department of Environmental Quality Office of Compliance and Enforcement 700 NE Multnomah Street, Suite 600 Portland, OR 97232-4100	OAH Reference No.: 2020-ABC-04125 DEQ Case No. AQ/ACDP-NWR-2020-079	Withdraw Notice 9/17/2021

**24. Has the debtor notified any governmental unit of any release of hazardous material?**

- ☒ No.  
☐ Yes. Provide details below.

Site name and address	Governmental unit name and address	Environmental law, if known address	Date of notice
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**Part 13: Details About the Debtor's Business or Connections to Any Business****25. Other businesses in which the debtor has or has had an interest**

List any business for which the debtor was an owner, partner, member, or otherwise a person in control within 6 years before filing this case. Include this information even if already listed in the Schedules.

☐ None

Business name address	Describe the nature of the business	Employer Identification number Do not include Social Security number or ITIN.	Dates business existed
25.1. <b>Capitan Co-Pack</b> 4168 W. 1st Ave. Eugene, OR 97402	55% owned - Majority Shareholder of Capitan Co-Pack	EIN: 85-0501595	From-To 2020-Present
25.2. <b>Bloomcraft Inc.</b> 4168 W. 1st Ave. Eugene, OR 97402	Wholly owned business - never generated revenue/Non-operating company	EIN: 83-4225659	From-To 2019-Present
25.3. <b>Columbia 410 LLC</b> 410 Industrial Way Molalla, OR 97038	100% Wholly owned entity that owed the property in Molalla	EIN: n/a	From-To 2019 - 2022
25.4. <b>Applied Discoveries LLC</b> 305 CHKALOW DR, STE 111-179 Vancouver, WA 98683	Onwed 50% - Non-operating company, no bank account.	EIN: 87-4546243	From-To 2/2022 - 6/3/2024
25.5. <b>Applied Discoveries Inc.</b> 305 CHKALOW DR, STE 111-179 Vancouver, WA 98683	1 share (50%) - Non-operating company	EIN: 92-0951376	From-To 11/2022 - Present

**26. Books, records, and financial statements**

26a. List all accountants and bookkeepers who maintained the debtor's books and records within 2 years before filing this case.

☐ None

Name and address	Date of service From-To
26a.1. <b>Jolt Strategies</b> 401 Fire Fly Lane Southport, NC 28461	2021 - Present

26b. List all firms or individuals who have audited, compiled, or reviewed debtor's books of account and records or prepared a financial statement within 2 years before filing this case.

☐ None

Name and address		Date of service From-To
26b.1.	<b>Jolt Strategies 401 Fire Fly Lane Southport, NC 28461</b>	<b>2021 - Present</b>

26c. List all firms or individuals who were in possession of the debtor's books of account and records when this case is filed.

☐ None

Name and address		If any books of account and records are unavailable, explain why
26c.1.	<b>Jolt Strategies 401 Fire Fly Lane Southport, NC 28461</b>	

26d. List all financial institutions, creditors, and other parties, including mercantile and trade agencies, to whom the debtor issued a financial statement within 2 years before filing this case.

☐ None

Name and address	
26d.1.	<b>Creekside Valley Farms, LLC PO Box 99 Lafayette, OR 97127</b>
26d.2.	<b>Samuel Bulow 4839 S Brandon St. Seattle, WA 98118</b>
26d.3.	<b>Orion Lekos 1059 Shaw Rd. Bellingham, WA 98229</b>
26d.4.	<b>Dayton Whitmore 205 W Arlington St. Gladstone, OR 97027</b>
26d.5.	<b>Wildcat Holdings LLC 39391 SE Lusted Rd. Sandy, OR 97055</b>
26d.6.	<b>Benjamin Children's Trust 716 Boylston Ave E Unit 8 Seattle, WA 98102</b>
26d.7.	<b>Philip Herbert Benjamin 716 Boylston Ave E Unit 8 Seattle, WA 98102</b>
26d.8.	<b>George Andrew Holmes Benjamin 1925 Interlaken Dr. E Seattle, WA 98112</b>
26d.9.	<b>Katherine Sill Benjamin 1925 Interlaken Dr. E Seattle, WA 98112</b>
26d.10.	<b>Colzen Co. LLC 4839 S Brandon St Seattle, WA 98118</b>

**Name and address**

26d.11. **Sletta Living Trust**  
**8945 SW Ash Meadows Circle #130**  
**Wilsonville, OR 97070**

26d.12. **Crabtree Living Trust**  
**59806 Medicine Hat Lane**  
**Bend, OR 97702**

26d.13. **Jacob Scott Crabtree**  
**4835 SE Anderegg Loop**  
**Portland, OR 97236**

26d.14. **ABM Equipment Co. Inc.**  
**13911 NW 3rd Ct**  
**Vancouver, WA 98685**

26d.15. **Blue Haron Investment**  
**1509 SW Sunset Blvd. Ste. 2B**  
**Portland, OR 97239**

26d.16. **Douglass Nueman**  
**951 Emigrant creek Road**  
**Ashland, OR 97520**

26d.17. **Bluff Acres Farms LLC**  
**9200 SE Sunnybrook Blvd. #170**  
**Clackamas, OR 97015**

26d.18. **Baker Valley Farms LLC**  
**301 N. 3rd Street, Suite 7**  
**Yakima, WA 98907**

**27. Inventories**

Have any inventories of the debtor's property been taken within 2 years before filing this case?

☐ No

☒ Yes. Give the details about the two most recent inventories.

	<b>Name of the person who supervised the taking of the inventory</b>	<b>Date of inventory</b>	<b>The dollar amount and basis (cost, market, or other basis) of each inventory</b>
27.1	<b>Jacob Crabtree</b>	<b>12/31/2023</b>	<b>\$120,000.00</b>

**Name and address of the person who has possession of inventory records**

**CHTC Inc.**  
**4168 W. 1st Ave.**  
**Eugene, OR 97402**

**28. List the debtor's officers, directors, managing members, general partners, members in control, controlling shareholders, or other people in control of the debtor at the time of the filing of this case.**

<b>Name</b>	<b>Address</b>	<b>Position and nature of any interest</b>	<b>% of interest, if any</b>
<b>Jacob Scott Crabtree</b>	<b>4835 SE Anderegg Loop</b> <b>Portland, OR 97236</b>	<b>CEO</b>	<b>34.9%</b>

  

<b>Name</b>	<b>Address</b>	<b>Position and nature of any interest</b>	<b>% of interest, if any</b>
<b>Wildcat Holdings LLC</b>	<b>39391 SE Lusted Rd.</b> <b>Sandy, OR 97055</b>	<b>CVO</b>	<b>34.9%</b>

Name	Address	Position and nature of any interest	% of interest, if any
Douglas Neuman	951 Imigrant Creek Rd. Ashland, OR 97520	Board Member	.78%
Name	Address	Position and nature of any interest	% of interest, if any
Samuel Bulow	4839 S Brandon St. Seattle, WA 98118	Member	8.94%
Name	Address	Position and nature of any interest	% of interest, if any
Orion Lekos	1059 Shaw Rd. Bellingham, WA 98229	Member	2.49%
Name	Address	Position and nature of any interest	% of interest, if any
Dayton Whitmore	205 W Arlington St. Gladstone, OR 97027	Member	1.79%
Name	Address	Position and nature of any interest	% of interest, if any
Benjamin Children's Trust	716 Boylston Ave E Unit 8 Seattle, WA 98102	Member	7.53%
Name	Address	Position and nature of any interest	% of interest, if any
Philip Herbert Benjamin	716 Boylston Ave E Unit 8 Seattle, WA 98102	Member	2.33%
Name	Address	Position and nature of any interest	% of interest, if any
George Andrew Holmes Benjamin	1925 Interlaken Dr. E Seattle, WA 98112	Member	1.16%
Name	Address	Position and nature of any interest	% of interest, if any
Katherine Sill Benjamin	1925 Interlaken Dr. E Seattle, WA 98112	Member	1.16%
Name	Address	Position and nature of any interest	% of interest, if any
Colzen Co. LLC	4839 S Brandon St Seattle, WA 98118	Member	.21%
Name	Address	Position and nature of any interest	% of interest, if any
Sletta Living Trust	8945 SW Ash Meadows Circle #130 Wilsonville, OR 97070	Member	.063%
Name	Address	Position and nature of any interest	% of interest, if any
Crabtree Living Trust	59806 Medicine Hat Lane Bend, OR 97702	Member	.031%
Name	Address	Position and nature of any interest	% of interest, if any
ABM Equipment Co. Inc.	13911 NW 3rd Ct Vancouver, WA 98685	Member	.314%



Name	Address	Position and nature of any interest	% of interest, if any
Blue Haron Investment	1509 SW Sunset Blvd. Ste. 2B Portland, OR 97239	Member	2.72%
Name	Address	Position and nature of any interest	% of interest, if any
Bluff Acres Farms LLC	9200 SE Sunnybrook Blvd. #170 Clackamas, OR 97015	Member	.23%
Name	Address	Position and nature of any interest	% of interest, if any
Baker Valley Farms LLC	301 N. 3rd Street, Suite 7 Yakima, WA 98907	Member	.40%

29. Within 1 year before the filing of this case, did the debtor have officers, directors, managing members, general partners, members in control of the debtor, or shareholders in control of the debtor who no longer hold these positions?

- ☐ No  
☒ Yes. Identify below.

Name	Address	Position and nature of any interest	Period during which position or interest was held
Nishan Karassik	4805 SW Chestnut Plance Beaverton, OR 97005	Board Member	2021 - 2023

30. Payments, distributions, or withdrawals credited or given to insiders

Within 1 year before filing this case, did the debtor provide an insider with value in any form, including salary, other compensation, draws, bonuses, loans, credits on loans, stock redemptions, and options exercised?

- ☐ No  
☒ Yes. Identify below.

	Name and address of recipient	Amount of money or description and value of property	Dates	Reason for providing the value
30.1	Captain Co-Pack 4168 West 1st Avenue Eugene, OR 97402	\$152,514.85	Over the last year	Cover Captain Co-Packs expenses
	Relationship to debtor Partially owned by Debtor			
30.2	Bloomcraft, Inc 4515 NE Elliot Cir Corvallis, OR 97330	\$70,722.85	Over last year	Inter-company transfers to pay bills of the Debtor. Bloomcraft was solely an intermediary for these transactions.
	Relationship to debtor Owned by Affiliates of Debtor			

Debtor **CHTC Inc.**

Case number (if known) \_\_\_\_\_

	Name and address of recipient	Amount of money or description and value of property	Dates	Reason for providing the value
30.3	Jacob Scott Crabtree 4835 SE Anderegg Loop Portland, OR 97236	\$4,711.55	7/28/2023, 8/4/2023, and 4/12/2024	Salary
	Relationship to debtor CEO			
30.4	Billy Tosheff 39391 SE Lusted Rd. Sandy, OR 97055	\$2,307.70	7/28/2023 and 8/4/2023	Salary
	Relationship to debtor CVO			

31. Within 6 years before filing this case, has the debtor been a member of any consolidated group for tax purposes?

- ☒ No  
☐ Yes. Identify below.

Name of the parent corporation

Employer Identification number of the parent corporation

32. Within 6 years before filing this case, has the debtor as an employer been responsible for contributing to a pension fund?

- ☒ No  
☐ Yes. Identify below.

Name of the pension fund

Employer Identification number of the pension fund

Debtor **CHTC Inc.**

Case number (if known)

**Part 14: Signature and Declaration**

**WARNING** -- Bankruptcy fraud is a serious crime. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$500,000 or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

I have examined the information in this *Statement of Financial Affairs* and any attachments and have a reasonable belief that the information is true and correct.

I declare under penalty of perjury that the foregoing is true and correct.

Executed on **June 20, 2024**

**/s/ Jacob Crabtree**  
Signature of individual signing on behalf of the debtor

**Jacob Crabtree**  
Printed name

Position or relationship to debtor **CEO**

**Are additional pages to *Statement of Financial Affairs for Non-Individuals Filing for Bankruptcy* (Official Form 207) attached?**

☒ No

☐ Yes

**United States Bankruptcy Court  
District of Oregon**

In re	<b>CHTC Inc.</b>		Debtor(s)	Case No.	
				Chapter	<b>7</b>

**VERIFICATION OF CREDITOR MATRIX**

I, the CEO of the corporation named as the debtor in this case, hereby verify that the attached list of creditors is true and correct to the best of my knowledge.

Date:	<b>June 20, 2024</b>		
		<b>/s/ Jacob Crabtree</b>	
		<b>Jacob Crabtree/CEO</b>	
		Signer/Title	